

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

ADDRESS (number and street) ▼

8403 Colesville Road

Suite 1550

☐ Check if different than previously reported. (ACC)

Silver Spring

MD

20910

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00358812

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2016

through

M M M / D D D / Y Y Y Y Y Y
02 29 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jesse Bushman

Signature of Treasurer

Jesse Bushman

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 17 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 02 / 01 / 2016 To: M M / D D / Y Y Y Y Y 02 / 29 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2016		182787.62
(b) Cash on Hand at Beginning of Reporting Period.....	180254.50	
(c) Total Receipts (from Line 19)	2614.00	3189.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	182868.50	185976.62
7. Total Disbursements (from Line 31)	2083.33	5191.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	180785.17	180785.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	6

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

 (a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

2614.00

3189.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

2614.00

3189.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

2614.00

3189.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

2614.00

3189.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

2614.00

3189.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	83.33	191.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	83.33	191.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2083.33	5191.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2083.33	5191.45

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2614.00	3189.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2614.00	3189.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	83.33	191.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	83.33	191.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 24
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Kendra M Adkisson

Mailing Address 111 Wabash Dr.

City Lexington State KY Zip Code 40503-1920

FEC ID number of contributing federal political committee.

C

Name of Employer
WomanKind Midwives

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11992

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Kendra M Adkisson

Mailing Address 111 Wabash Dr.

City Lexington State KY Zip Code 40503-1920

FEC ID number of contributing federal political committee.

C

Name of Employer
WomanKind Midwives

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11996

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Katherine Beach

Mailing Address 14 Drew Rd

City South Portland State ME Zip Code 04106-5118

FEC ID number of contributing federal political committee.

C

Name of Employer
Maine Medical Partners

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11980

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Dianne Birney

Mailing Address 2976 Okemos Rd

City

Mason

State

MI

Zip Code

48854-9496

FEC ID number of contributing
federal political committee.

C

Name of Employer

Next Generation Lactation Svc

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.12022

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Debbie A Boucher

Mailing Address 38504 N Munn Rd

City

Lake Villa

State

IL

Zip Code

60046-7763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Childbirth the Way Ntr Intd

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11AI.12025

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Mandy Brady

Mailing Address 399 Argonne Rd

City

Southport

State

NC

Zip Code

28461-7828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Birth and Womens Care

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.12006

Amount of Each Receipt this Period

10.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Katherine Parker Bryden

Mailing Address 903 Clay St

City

Cedar Falls

State

IA

Zip Code

50613-3040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Covenant Midwives and Women 's

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.12001

Amount of Each Receipt this Period

5.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Susan Burton

Mailing Address 2710 Floral Blvd

City

Butte

State

MT

Zip Code

59701-4116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westside Midwifery & Wmn's Hlt

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.12005

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Katherine Camacho Carr

Mailing Address 1655 S Lane St

City

Seattle

State

WA

Zip Code

98144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Seattle University

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.11979

Amount of Each Receipt this Period

100.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Kathryn K. Carr

Mailing Address 5 Garden Ct Apt 3

City

Cambridge

State

MA

Zip Code

02138-1355

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Elizabeth's Medical Center

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.11984

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Marylou Carr

Mailing Address 188 Pleasant St

City

Arlington

State

MA

Zip Code

02476-8154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cambridge Health Alliance

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.12021

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Rebecca Choitz

Mailing Address 62 E. Abington Ave.

City

Philadelphia

State

PA

Zip Code

19118-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwives of Delaware County

Occupation

Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.11998

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Margaret E Colby-Bittner

Mailing Address 4742 La Puma Ct

City

Camarillo

State

CA

Zip Code

93012-4055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Woodland Hills

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11990

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Kristin Conrad

Mailing Address 3285 Nikkel Lane

City

Blacksburg

State

VA

Zip Code

24060-0791

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic OBGYN

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

02 / 26 / 2016

Transaction ID : SA11AI.12030

Amount of Each Receipt this Period

100.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Angela Deneris

Mailing Address 2718 Forest Spring Way

City

Salt Lake City

State

UT

Zip Code

84106-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Utah

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 05 / 2016

Transaction ID : SA11AI.11974

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Emma Dorsey

Mailing Address 2035 Kater St

City

Philadelphia

State

PA

Zip Code

19146-1312

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11AI.12026

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Cathy Emeis

Mailing Address 3455 SW US Veterans Hospital Rd
Mailcode: SN-5S

City

Portland

State

OR

Zip Code

97239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health and Science Univ

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.11981

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Stephanie Estes

Mailing Address 810 Wellington St

City

Baltimore

State

MD

Zip Code

21211-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.11997

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Barbara Fildes

Mailing Address PO Box 1131

City

Hanover

State

NH

Zip Code

03755-1131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12017

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Laurie Ann Friedman

Mailing Address 33 Essex St.

City

Cambridge

State

MA

Zip Code

02139-2647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harvard Vanguard Medical Assoc

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11986

Amount of Each Receipt this Period

150.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Anne Gilman

Mailing Address 13765 Glenoaks Blvd

City

Sylmar

State

CA

Zip Code

91342-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Applicable

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.12003

Amount of Each Receipt this Period

10.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Karen Trister Trister Grace

Mailing Address 5309 Wehawken Rd

City

Bethesda

State

MD

Zip Code

20816-3137

FEC ID number of contributing
federal political committee.

C

Name of Employer

John Hopkins School of Nursing

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11Al.11982

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Sharon L. Holley

Mailing Address 322 Battle Rd

City

Antioch

State

TN

Zip Code

37013-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

VanderbiltUniv.Schl of Nursing

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11Al.11987

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Carol L. Howe

Mailing Address 13043 SW Ascension Drive

City

Tigard

State

OR

Zip Code

97223-5686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11Al.11975

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Carol L. Howe

Mailing Address 13043 SW Ascension Drive

City

Tigard

State

OR

Zip Code

97223-5686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11993

Amount of Each Receipt this Period

40.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Laura Jenson

Mailing Address 4208 SE 9th Ave

City

Portland

State

OR

Zip Code

97202-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health & Science Univ

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11977

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Anne Judge

Mailing Address 14412 SE 19th Pl

City

Bellevue

State

WA

Zip Code

98007-6008

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12013

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Julie King

Mailing Address 7690 S Biscayne Dr

City

Cottonwood Heights

State

UT

Zip Code

84121-5347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Utah-Collge of Nursing

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12016

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Susan Agard Krause

Mailing Address 163 Lincoln Ave

City

Amherst

State

MA

Zip Code

01002-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Medical Center

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.12004

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Kathleen Lavery

Mailing Address 830 Browns Lake Rd

City

Jackson

State

MI

Zip Code

49203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Everyday Blessings

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

02 / 17 / 2016

Transaction ID : SA11AI.12008

Amount of Each Receipt this Period

200.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Judy Lazarus

Mailing Address 8246 30th Ave. NE

City
Seattle

State
WA

Zip Code
98115-4726

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neighborcare Health

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12011

Amount of Each Receipt this Period

100.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Candace L. Mabbitt

Mailing Address 820 2nd Ave Apt 104

City
Kirkland

State
WA

Zip Code
98033-8151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Swedish Medical Center

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 26 / 2016

Transaction ID : SA11AI.12029

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Paige McDaniel

Mailing Address 3815 Washington Blvd - Apt. 211

City
Indianapolis

State
IN

Zip Code
46205

FEC ID number of contributing
federal political committee.

C

Name of Employer
HealthNet/Indian University

Occupation
Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11985

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Cara McGuinness

Mailing Address 382 Waller Street

City State Zip Code
 San Francisco CA 94117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.11994

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Mary Milkey

Mailing Address 12737 Macon Rd

City State Zip Code
 Saline MI 48176-9313

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.12002

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Ann Oswood

Mailing Address 5908 Royal Oaks Dr

City State Zip Code
 Shoreview MN 55126-8418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Generations Women's Health Ctr

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.11999

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Cheryl Owens

Mailing Address 803 E Moravian Bnd

City

Chatsworth

State

GA

Zip Code

30705-4005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dalton State College

Occupation

Assistant Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12018

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Kathleen Page

Mailing Address 2007 Graves Mill Rd Forest

City

Lynchburg

State

VA

Zip Code

24551

FEC ID number of contributing
federal political committee.

C

Name of Employer

CMG Women's Center

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11988

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Hannah Pajolek

Mailing Address 1406 E Republican St # 405

City

Seattle

State

WA

Zip Code

98112-4562

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12014

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Dana B Perlman

Mailing Address 723 Arden Road

City State Zip Code
 Jenkintown PA 19046-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Midwifery Inst of Philad Univ

Occupation
 Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11991

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Dana B Perlman

Mailing Address 723 Arden Road

City State Zip Code
 Jenkintown PA 19046-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Midwifery Inst of Philad Univ

Occupation
 Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11995

Amount of Each Receipt this Period

100.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Barbara Peterson

Mailing Address 710 Parkview Dr

City State Zip Code
 Gibsonsia PA 15044-6131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation
 Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 26 / 2016

Transaction ID : SA11AI.12028

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

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TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Melissa Rubin

Mailing Address 6046 38th Ave SW

City
Seattle

State
WA

Zip Code
98126-3024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwives at Valley Medical Ctr

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12012

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Diana M Sanders

Mailing Address 9998 W 1350 N

City
Nappanee

State
IN

Zip Code
46550-8791

FEC ID number of contributing
federal political committee.

C

Name of Employer

Childbirth Choices & Wmn's Hlt

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.12007

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Mary Sheridan

Mailing Address 1081 W 36th St

City
San Pedro

State
CA

Zip Code
90731-6401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

153.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12019

Amount of Each Receipt this Period

153.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Jamie L Sternberg

Mailing Address 1505 Market St

City

Algonac

State

MI

Zip Code

48001-1316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne State Univ Physician Grp

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 17 / 2016

Transaction ID : SA11AI.12010

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Heather Suzette Swanson

Mailing Address 5721 N FM 88

City

Weslaco

State

TX

Zip Code

78599-5864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Holy Family Services, Inc.

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 08 / 2016

Transaction ID : SA11AI.11989

Amount of Each Receipt this Period

50.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Jaylon VonMertens

Mailing Address 119 Middle Rd

City

Hancock

State

NH

Zip Code

03449-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12020

Amount of Each Receipt this Period

20.00

☐ Memo Item

February 2016 Contribution

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120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Vanna Waldron

Mailing Address 8533 Ashworth Ave N

City
Seattle

State
WA

Zip Code
98103-4020

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12015

Amount of Each Receipt this Period

25.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

B. Susan Way

Mailing Address 85 Elizabeth Way

City

San Rafael

State

CA

Zip Code

94901-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Planned Parenthood

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.12023

Amount of Each Receipt this Period

1.00

☐ Memo Item

February 2016 Contribution

Full Name (Last, First, Middle Initial)

C. Ruth Zielinski

Mailing Address 9251 East DE Avenue

City

Richland

State

MI

Zip Code

49083-9428

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan

Occupation

Certified Nurse-Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

02 / 17 / 2016

Transaction ID : SA11AI.12009

Amount of Each Receipt this Period

100.00

☐ Memo Item

February 2016 Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

2614.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 7810 Old Branch Avenue

City Clinton State MD Zip Code 20735

Purpose of Disbursement
Bank of America fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 02 2016
Transaction ID : SB21B.12031

Amount of Each Disbursement this Period

23.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal INC

Mailing Address 4100 Solutions Center #774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
PayPal fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 03 2016
Transaction ID : SB21B.12032

Amount of Each Disbursement this Period

59.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

83.33

TOTAL This Period (last page this line number only)..... ►

83.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC

Full Name (Last, First, Middle Initial)

A. GENE GREEN CONGRESSIONAL CAMPAIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Mailing Address PO BOX 16128

City	State	Zip Code
HOUSTON	TX	77222

Transaction ID : SB23.12036Purpose of Disbursement
Campaign Contribution

Candidate Name

GENE GREEN CONGRESSIONAL CAMPAIGNCategory/
Type

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TX	District: 29	

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

☐ Memo Item

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

☐ Memo Item

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

2000.00
